

TABLE F. REVENUES & EXPENSES, UNINFLATED - NEW FACILITY OR SERVICE

INSTRUCTION: After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Table F should reflect current revenues and expenses should be consistent with the projections in Table E and with the costs of Manpower listed in Table G. Manpower. Indicate on the tab Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. why the assumptions are reasonable. Specify the sources of non-operating income.

Projected Years (ending at least two years after project completion and full occupancy) Add years, if needed in order to document that the hospital over total expenses consistent with the Financial Feasibility standard.

Indicate CY or FY	CY 2023	CY 2024	CY 2025	CY 2026	CY 2027
1. REVENUE					
a. Inpatient Services					
3.7 and 3.7WM	\$ 1,755,600	\$ 7,520,100	\$ 9,190,650	\$ 9,349,900	\$ 9,443,350
Residential SUD	\$ 2,510,400	\$ 8,594,400	\$ 10,116,000	\$ 9,349,900	\$ 9,443,350
Residential Process/ED	\$ 750,000	\$ 5,371,500	\$ 6,952,350	\$ 8,014,200	\$ 8,094,300
b. Outpatient Services	\$ -	\$ -	\$ -	\$ -	\$ -
Gross Patient Service Revenues	\$ 5,016,000	\$ 21,486,000	\$ 26,259,000	\$ 26,714,000	\$ 26,981,000
c. Allowance For Bad Debt	\$ 516,000	\$ 2,208,000	\$ 2,699,000	\$ 2,746,000	\$ 2,773,000
d. Contractual Allowance					
e. Charity Care	\$ 75,000	\$ 420,000	\$ 540,000	\$ 660,000	\$ 780,000
Net Patient Services Revenue	\$ 4,425,000	\$ 18,858,000	\$ 23,020,000	\$ 23,308,000	\$ 23,428,000
f. Other Operating Revenues (Specify)					
NET OPERATING REVENUE	\$ 4,425,000	\$ 18,858,000	\$ 23,020,000	\$ 23,308,000	\$ 23,428,000
2. EXPENSES					
a. Salaries & Wages (including benefits)	\$ 3,184,000	\$ 5,094,000	\$ 6,270,500	\$ 7,204,000	\$ 8,257,900
b. Contractual Services					
c. Interest on Current Debt					
d. Interest on Project Debt					
e. Current Depreciation	\$ 43,000	\$ 672,000	\$ 685,000	\$ 702,000	\$ 725,000
f. Project Depreciation					
g. Current Amortization					
h. Project Amortization					
i. Supplies					
j. Other Expenses (Specify) Total	\$ 9,053,000	\$ 11,618,000	\$ 11,739,000	\$ 13,092,000	\$ 13,403,000
k. Dietary	\$ 308,000	\$ 752,000	\$ 873,000	\$ 904,000	\$ 931,000
l. Repairs and Maintenance	\$ 123,000	\$ 346,000	\$ 410,000	\$ 424,000	\$ 437,000
m. Transportation	\$ 271,000	\$ 384,000	\$ 396,000	\$ 408,000	\$ 42,000
n. Administrative	\$ 2,240,000	\$ 2,553,000	\$ 2,630,000	\$ 2,708,000	\$ 2,790,000
o. Marketing	\$ 5,000,000	\$ 5,150,000	\$ 5,305,000	\$ 5,464,000	\$ 5,628,000
p. Utilities	\$ 28,000	\$ 128,000	\$ 159,000	\$ 165,000	\$ 170,000
q. Insurance	\$ 279,000	\$ 432,000	\$ 445,000	\$ 458,000	\$ 472,000
r. Property Taxes	\$ 200,000	\$ 309,000	\$ 318,000	\$ 328,000	\$ 338,000
s. Interest Expense and Finan Fees	\$ 604,000	\$ 1,564,000	\$ 1,572,000	\$ 1,531,000	\$ 1,492,000
TOTAL OPERATING EXPENSES	\$ 12,280,000	\$ 17,384,000	\$ 18,694,500	\$ 20,998,000	\$ 22,385,900

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3. INCOME					
a. Income From Operation	\$ (7,855,000.00)	\$ 1,474,000.00	\$ 4,325,500.00	\$ 2,310,000.00	\$ 1,042,100.00
b. Non-Operating Income					
SUBTOTAL	\$ (7,855,000.00)	\$ 1,474,000.00	\$ 4,325,500.00	\$ 2,310,000.00	\$ 1,042,100.00
c. Income Taxes					
NET INCOME (LOSS)	\$ (7,855,000.00)	\$ 1,474,000.00	\$ 4,325,500.00	\$ 2,310,000.00	\$ 1,042,100.00
4. PATIENT MIX					
a. Percent of Total Revenue					
1) Medicare	10.0%	10.0%	10.0%	10.0%	10.0%
2) Medicaid	15.0%	15.0%	15.0%	15.0%	15.0%
3) Blue Cross	35.0%	35.0%	35.0%	35.0%	35.0%
4) Commercial Insurance	30.0%	30.0%	30.0%	30.0%	30.0%
5) Self-pay	10.0%	10.0%	10.0%	10.0%	10.0%
6) Other					
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days					
Total MSGA					
1) Medicare					
2) Medicaid					
3) Blue Cross					
4) Commercial Insurance					
5) Self-pay					
6) Other					
TOTAL	0.0%	0.0%	0.0%	0.0%	0.0%

